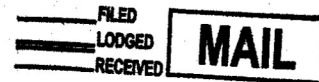


Plaintiff's Name Maure Nocomme
CDCR No. WG0398
Address P.O. Box 1508
Chowchilla Ca 93610



SEP 12 2022

AT SEATTLE
CLERK U.S. DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
BY DEPUTY

IN THE UNITED STATES DISTRICT COURT
FOR THE Western DISTRICT OF Washington

(Name of Plaintiff)

(Case Number)

vs.

CIVIL RIGHTS COMPLAINT UNDER:

Spokane County, Federal
Bureau of Prisons

☒ 42 U.S.C. 1983 (State Prisoner)

22-CV-1291

JLR
MLP

(Names of all Defendants)

I. Previous Lawsuits (list all other previous or pending lawsuits on additional page):

A. Have you brought any other lawsuits while a prisoner? Yes _____ No X

B. If your answer to A is yes, how many? _____

Describe previous or pending lawsuits in the space below. (If more than one, attach additional page to continue outlining all lawsuits in same format.)

1. Parties to this previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if Federal Court, give name of District; if State Court, give name of County)

3. Docket Number _____ 4. Assigned Judge _____

5. Disposition (Was the case dismissed? Appealed? Is it still pending?) _____

6. Filing Date (approx.) _____ 7. Disposition Date (approx.) _____

II. Exhaustion of Administrative Remedies

NOTICE: Pursuant to the Prison Litigation Reform Act of 1995, A[n]o action shall be brought with respect to prison conditions under [42 U.S.C. * 1983], or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted. 42 U.S.C. * 1997e(a). Prior to filing suit, inmates are required to exhaust the available administrative remedy process, Jones v. Bock, 549 U.S. 199, 211, 127 S.Ct. 910, 918-19 (2007); McKinney v. Carey, 311 F.3d 1198, 1999 (9th Cir. 2002), and neither futility nor the unavailability of money damages will excuse the failure to exhaust, Porter v. Nussle, 534 U.S. 516, 524, 122 S.Ct. 983, 988 (2002). If the court determines that an inmate failed to exhaust prior to filing suit, the unexhausted claims will be dismissed, without prejudice. Jones, 549 U.S. at 223-24, 127 S.Ct. at 925-26.

A. Is there an inmate appeal or administrative remedy process available at your institution?

Yes _____ No ✓

B. Have you filed an appeal or grievance concerning ALL of the facts contained in this complaint?

Yes _____ No ✓

C. Is the process completed?

Yes _____ If your answer is yes, briefly explain what happened at each level.

No x If your answer is no, explain why not.

The appropriate administrative remedies pursuant to the Federal Bureau of Prisons (FBOP) were unable to be processed due to the fact that I am currently incarcerated in Central California Women's Facility (CCWF). Please be advised the original complaint was filed with Spokane County.

III. Defendants

List each defendant's full name, official position, and place of employment and address in the spaces below. If you need additional space please provide the same information for any additional defendants on separate sheet of paper.

A. Name Spokane County is employed as _____

Current Address/Place of Employment _____

B. Name Nurses / Doctors is employed as Medical Providers at Spokane County

Current Address/Place of Employment _____

C. Name Federal Bureau of Prisoners is employed as _____

Current Address/Place of Employment _____

D. Name _____ is employed as _____

Current Address/Place of Employment _____

E. Name _____ is employed as _____

Current Address/Place of Employment _____

IV. Causes of Action (You may attach additional pages alleging other causes of action and the facts supporting them if necessary. Must be in same format outlined below.)

Claim 1: The following civil right has been violated (e.g. right to medical care, access to courts, due process, free speech, freedom of religion, freedom from cruel and unusual punishment, etc.):

My 8th amendment was violated, when I was refused medical care

Supporting Facts (Include all facts you consider important to Claim 1. State what happened clearly and in your own words. You need not cite legal authority or argument. Be certain to describe exactly what each defendant, by name, did to violate the right alleged in Claim 1.):

My initial request for medical attention was on October 2, 2019. I had put in several requests for an xray and I was denied by nurses, not an actual physician or a charge nurse. Twenty nine days later I recieved an xray after I had an accident in my cell and my hip broke, however it took two days for me to be taken to an actual hospital. This type of treatment violated my right to proper medical care and because I was in a tremendous amount of pain it's cruel and unusual punishment. I layed

in a cell screaming in pain for almost two days with a broke hip and
no one helped me

Claim 2: The following civil right has been violated (e.g. right to medical care, access to courts, due process, free speech, freedom of religion, freedom of association, freedom from cruel and unusual punishment, etc.):

Supporting Facts (Include all facts you consider important to Claim 2. State what happened clearly and in your own words. You need not cite legal authority or argument. Be certain to describe exactly what each defendant, *by name*, did to violate the right alleged in Claim 2.):

V. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I would like to be compensated for the pain and suffering that I have had to endure and am still enduring. I would like my medical treatments to be taken care of, I will have a long recovery

I declare under penalty of perjury that the foregoing is true and correct.

Date: 7.1.22

Signature of Plaintiff: 

PROOF OF SERVICE

(C.C.P. §§1013(a); 2015.5; 28 U.S.C. §1746)

I, Nacome Moore, am over the age of eighteen (18) years, and I (am) (am not) a party to the within cause of action. My address is:

10351 N Lynn Cir #61-N
Mira Loma CA 91752


On, _____, I served the following documents:

_____ on the below named individual(s) by depositing true and correct copies thereof in the United State mail in Chowchilla, California, with postage fully prepaid thereon, addressed as follows:

- | | |
|---------------------------------|----------|
| 1. <u>United States Western</u> | 2. _____ |
| <u>District of Washington</u> | _____ |
| <u>700 Stewart St.</u> | _____ |
| <u>Seattle, WA 98101</u> | _____ |
| _____ | _____ |

I have read the above statements and declare under the penalty of perjury of the laws of the State of California that the foregoing is true and correct.

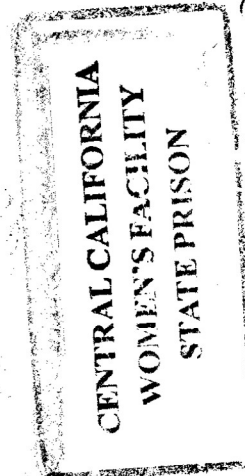
Executed this 1 - day of July, 2022, at Central California Women's Facility - Chowchilla California.

(Signature) 

NACOMIE MORE W90398
PO BOX 1508 CWF
CHONOWILLA CA 93419

FRESNO CA 936

9 SEP 2022 PM 1 L

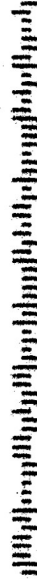


United States District Court
For the Western District of Washington
700 Stewart St.
Seattle WA 98101



SEP 12 2022

AT SEATTLE
CLERK U.S. DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
BY



98101-444285